

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number K 50007246846	2. Page 1 of 1	3. Emergency Response Phone (800) 483-3716	4. Manifest Tracking Number 008091339 FLE		
5. Generator's Name and Mailing Address Clean Harbors Kansas LLC 2049 North New York Street Wichita, KS 67219			Generator's Site Address (if different than mailing address) SAME				
Generator's Phone: (316) 769-7400							
6. Transporter 1 Company Name Action Resources			U.S. EPA ID Number AI R000007237				
7. Transporter 2 Company Name			U.S. EPA ID Number				
8. Designated Facility Name and Site Address Clean Harbors Env Services Inc 2247 South Highway 71 Kimball NE 68148			U.S. EPA ID Number NE D081723513				
Facility's Phone: (308) 235-4017							
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
			No.	Type			
	x	1. HA3077, HAZARDOUS WASTE, SOLID, N.O.S., (TOLUENE, LEAD), 9, PG III	1	OT	EST 12	Y	D004 D005 D007 D008 D039 D040
		2.	1	dm	EST 12	Y	
		3.					
		4.					
14. Special Handling Instructions and Additional Information 1. CH821506X06 EAC#171 TR# CHRT#26253							
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.							
Generator's/Offeror's Printed/Typed Name Jim T. Brown			Signature <i>[Signature]</i>			Month Day Year 12/29/15	
TRANSPORTER	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____						
	17. Transporter Acknowledgment of Receipt of Materials						
	Transporter 1 Printed/Typed Name DAVID MEICCI			Signature <i>[Signature]</i>		Month Day Year 12/29/15	
	Transporter 2 Printed/Typed Name			Signature		Month Day Year	
DESIGNATED FACILITY	18. Discrepancy						
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection						
	Manifest Reference Number: _____						
	18b. Alternate Facility (or Generator)			U.S. EPA ID Number			
	Facility's Phone: _____						
	18c. Signature of Alternate Facility (or Generator) _____ Month Day Year						
	19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)						
	1. H040		2.		3.		4.
	20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a						
	Printed/Typed Name			Signature		Month Day Year	

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number KSD007246846		2. Page 1 of 1		3. Emergency Response Phone (800) 483-3718		4. Manifest Tracking Number 008091339 FLE			
5. Generator's Name and Mailing Address Clean Harbors Kansas LLC 2549 North New York Street Wichita, KS 67219						Generator's Site Address (if different than mailing address) SAME					
Generator's Phone: (316) 269-7400											
6. Transporter 1 Company Name Action Resources						U.S. EPA ID Number AI R000007237					
7. Transporter 2 Company Name						U.S. EPA ID Number					
8. Designated Facility Name and Site Address Clean Harbors Env Services Inc 2247 South Highway 71 Kimball, NE 69145						U.S. EPA ID Number NE D981723513					
Facility's Phone: (308) 235-4012											
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))			10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes		
					No.	Type					
	x	1. NA3077, HAZARDOUS WASTE, SOLID, N.O.S., (TOLUENE, LEAD), 9, PG III			1	CM	EST 12	Y	D004	D005	D007
									D008	D039	D040
14. Special Handling Instructions and Additional Information 1. CH831506X0B ERG#171 IR# T# CHRT#26253											
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.											
Generator's/Offor's Printed/Typed Name: Jim Tyson Signature: Jim Tyson Month: 12 Day: 29 Year: 15											
TRANSPORTER	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Transporter signature (for exports only): _____ Date leaving U.S.: _____										
	17. Transporter Acknowledgment of Receipt of Materials Transporter 1 Printed/Typed Name: Daniel Mercer Signature: Daniel Mercer Month: 1 Day: 29 Year: 15 Transporter 2 Printed/Typed Name: _____ Signature: _____ Month: _____ Day: _____ Year: _____										
DESIGNATED FACILITY	18. Discrepancy										
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection										
	Manifest Reference Number: _____										
	18b. Alternate Facility (or Generator) U.S. EPA ID Number: _____ Facility's Phone: _____										
18c. Signature of Alternate Facility (or Generator) Month: _____ Day: _____ Year: _____											
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)											
1. H040		2. _____		3. _____		4. _____					
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a Printed/Typed Name: Ed AVILA Signature: Ed AVILA Month: 01 Day: 30 Year: 15											

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Generator's Phone: (316) 269-7400									
6. Transporter 1 Company Name Action Resources				U.S. EPA ID Number AI R000007237					
7. Transporter 2 Company Name				U.S. EPA ID Number					
8. Designated Facility Name and Site Address Clean Harbors Env Services Inc 2247 South Highway 71 Kimball, NE 69145				U.S. EPA ID Number NED981723513					
Facility's Phone: (308) 235-4012									
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes			
		No.	Type						
x	1. NA3077, HAZARDOUS WASTE, SOLID, N.O.S., (TOLUENE, LEAD), 9, PG III	1	OT	EST 10	X		D004	D005	D007
							D008	D039	D040
	2.	1	CM	EST 12	Y				
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Generator's/Offor's Printed/Typed Name Jim Ivson				Signature <i>[Signature]</i>		Month Day Year 12 29 15			
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____									
17. Transporter Acknowledgment of Receipt of Materials									
Transporter 1 Printed/Typed Name Daniel Mercer				Signature <i>[Signature]</i>		Month Day Year 12 29 15			
Transporter 2 Printed/Typed Name				Signature		Month Day Year			
18. Discrepancy									
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection									
Manifest Reference Number: _____									
18b. Alternate Facility (or Generator) U.S. EPA ID Number									
Facility's Phone: _____									
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20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a									
Printed/Typed Name ED AVILA				Signature <i>[Signature]</i>		Month Day Year 01 30 15			



2247 South Highway 71
Kimball, NE 69145

TEL 308-235-4012
FAX 308-235-4307
www.cleanharbors.com

DATE: 1/30/2015

MANIFEST: 008091339FLE

Dear Valued Customer:

In accordance with 40 CFR 264.12(b), Clean Harbors Environmental Services, Inc., Kimball Facility, has appropriate state and federal permits to accept, store, and/or treat the waste you shipped to our facility. This letter should be kept on file with your copy of the signed manifest.

Clean Harbors Environmental Services, Inc. makes every effort to ensure that signed copies of manifests are returned to the waste generator as quickly as possible following receipt of your waste at our facility. This allows us to provide you with rapid verification that your waste shipment arrived safely at our waste management facility.

Once your waste has been received, Clean Harbors' personnel will verify that the quantity that has been received matches the quantity that was shipped. We also inspect the material and conduct testing to ensure that it meets the facility's waste acceptance criteria as described in our Waste Analysis Plan, as well as processing requirements. Every effort is made to complete the waste verification as quickly as possible; however, it is possible that the signed copy of the manifest may be returned to you before the waste verification process is completed. If a significant discrepancy, as defined by US EPA regulations (40 CFR 264.72), is discovered during the waste verification process, we will contact you in order to reconcile the discrepancy. Additionally, we will work with you to make any corrections to the waste manifest that are necessary.

Sincerely,

Receiving Department